ISSUE SLIP

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | LW | 71534 | 12-06-99 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | 71425 | 1/10/00 |

## INDEX OF CLAIMS

| | | | |
|---|---|---|---|
| ✔ | ............................. Rejected | N | ........................... Non-elected |
| = | ............................. Allowed | I | ........................... Interference |
| − | (Through numeral) Canceled | A | ........................... Appeal |
| ÷ | ............................. Restricted | O | ........................... Objected |

| Claim | Date | Claim | Date | Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)